

Derek Skees
119 Sinopah Street, Kalispell, MT

SENATE JUDICIARY
Exhibit No. 40
Date 21.01.15
Bill No. SB202

I rise in opposition to SB 202 and recommend a do not pass in this committee.

The Billings Gazette did a series of articles exploring the epidemic of suicide in Montana, and the solutions to this crisis starting November 25th, 2012. This crisis is described by Matt Kuntz, executive director of the Montana chapter of the National Alliance on Mental illness as a "public health crisis". Montana DPHHS did a great pamphlet detailing suicide in Montana, Facts, Figures and Formulas for prevention. I will reference both sources today.

For the first time, suicide has surpassed car accidents as the no.1 cause of injury-related death in the US. Montana has been in the top 5 states for suicide rates for the last 30 years, currently shifting from the first and second place. In all categories from Native American (which is the highest rate), Veteran, children, young adult, college students and elderly, the rate continues to climb every year.

Year after year Legislators have passed laws to help stem this tide, with Rep. Edie McClafferty being a great example this year where her HB 374, providing for school suicide prevention awareness training will be read this Friday. She has another that would provide for suicide prevention and training for primary care providers. Thank you!

It has been argued that you cannot legislate morality, yet you can enable laws that mold public opinion. What message are you trying to send today? When is suicide acceptable? If you determine today that the elderly can actually get help from their doctors in this act, what

message are you sending to these other epidemic level groups? Do you really think this bill will do anything but further increase the rate of suicides in Montana if you legalize it? *Just like it has in Oregon.*

Everything has consequences, and this bill will be the first step in loosening this struggle in Montana. How can you talk to a Native American contemplating suicide after the passage of this bill? How can you tell him that it is ok to kill yourself at the end of your life, but just not right now?

The DPHHS pamphlet begins with this quote, and it is with this quote I conclude:

"Suicide is a particularly awful way to die: the mental suffering leading up to it is usually prolonged, intense, and unpalliated. There is no morphine equivalent to ease the acute pain, and death not uncommonly is violent and grisly. The suffering of the suicidal is private and inexpressible, leaving family members, friends, and colleagues to deal with an almost unfathomable kind of loss, as well as guilt. Suicide carries in its aftermath a level of confusion and devastation that is, for the most part, beyond description."

Kay Redfield Jamison, Ph.D.
Professor of Psychiatry
Johns Hopkins University